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FF1AN060.PDF

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**2 / 48**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

MIKE GRAVEL FOR PRESIDENT 2008

Report Covering the Period

From: 12/01/2008

To: 12/31/2008

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	100000.00	100000.00	
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	0.00	0.00	
(d) The Candidate	0.00	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	0.00	0.00	
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00	
(b) Other Loans	0.00	0.00	
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00	
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	0.00	0.00	
(b) Fundraising	0.00	0.00	
(c) Legal and Accounting	0.00	0.00	
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	0.00	0.00	
21. OTHER RECEIPTS (Dividend, Interest, etc.)	0.00	0.00	
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	100000.00	100000.00	
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	0.00	0.00	
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	
25. FUNDRAISING DISBURSEMENTS	0.00	0.00	
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	0.00	0.00	
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	44615.73	44615.73	
(b) Other Repayments	0.00	0.00	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	44615.73	44615.73	
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees	0.00	0.00	
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	0.00	0.00	
29. OTHER DISBURSEMENTS	0.00	0.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	44615.73	44615.73	
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00		

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

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1. NAME OF COMMITTEE (in full)**MIKE GRAVEL FOR PRESIDENT 2008****ADDRESS (number and street)**

1600 N OAK ST #1412

CITY, STATE, and ZIP CODE

ARLINGTON

VA

22209

2. IDENTIFICATION NUMBER

C00423202

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Department of Treasury

Mailing Address

3700 East West Highway

City

Hyattsville

State

MD

Zip Code

20762

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Amount of Each Receipt this Period

100000.00

Matching fund January 09
2008

Transaction ID: SA16.20384

SUBTOTAL of Receipts This Page (optional)

100000.00

TOTAL This Period (last page this line number only)

100000.00

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 23 ☐ 24 ☐ 25 ☐ 26 ☒ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A.	<p>Full Name (Last, First, Middle Initial) MIKE GRAVEL</p> <p>Mailing Address 1600 NO OAK ST APT 1412</p> <p>City ARLINGTON State VA Zip Code 22209</p> <p>Purpose of Disbursement LOAN REPAYMENT</p> <p>Candidate Name MIKE GRAVEL FOR PRESIDENT 2008</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB27A.20386</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 6100.00</p> <p>101 Category/ Type</p>
B.	<p>Full Name (Last, First, Middle Initial) MIKE GRAVEL</p> <p>Mailing Address 1600 NO OAK ST APT 1412</p> <p>City ARLINGTON State VA Zip Code 22209</p> <p>Purpose of Disbursement LOAN REPAYMENT</p> <p>Candidate Name MIKE GRAVEL FOR PRESIDENT 2008</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB27A.20389</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>101 Category/ Type</p>
C.	<p>Full Name (Last, First, Middle Initial) MIKE GRAVEL</p> <p>Mailing Address 1600 NO OAK ST APT 1412</p> <p>City ARLINGTON State VA Zip Code 22209</p> <p>Purpose of Disbursement LOAN REPAYMENT</p> <p>Candidate Name MIKE GRAVEL FOR PRESIDENT 2008</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB27A.20390</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 15000.00</p> <p>101 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

24100.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input checked="" type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) MIKE GRAVEL	Transaction ID: SB27A.20391 Date of Disbursement																				
Mailing Address 1600 NO OAK ST APT 1412	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City ARLINGTON State VA Zip Code 22209	Amount of Each Disbursement this Period																				
Purpose of Disbursement LOAN REPAYMENT	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) MIKE GRAVEL	Transaction ID: SB27A.20392 Date of Disbursement																				
Mailing Address 1600 NO OAK ST APT 1412	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
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City ARLINGTON State VA Zip Code 22209	Amount of Each Disbursement this Period																				
Purpose of Disbursement LOAN REPAYMENT	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
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Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) MIKE GRAVEL	Transaction ID: SB27A.20393 Date of Disbursement																				
Mailing Address 1600 NO OAK ST APT 1412	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
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City ARLINGTON State VA Zip Code 22209	Amount of Each Disbursement this Period																				
Purpose of Disbursement LOAN REPAYMENT	<table border="1"> <tr> <td>6000.00</td> </tr> </table>	6000.00																			
6000.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

11100.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 23 ☐ 24 ☐ 25 ☐ 26 ☒ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
LOAN REPAYMENT

Candidate Name
MIKE GRAVEL FOR PRESIDENT 2008

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☒ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB27A.20394

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
LOAN REPAYMENT

Candidate Name
MIKE GRAVEL FOR PRESIDENT 2008

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☒ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB27A.20395

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

806.74

C.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
LOAN REPAYMENT

Candidate Name
MIKE GRAVEL FOR PRESIDENT 2008

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☒ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB27A.20396

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

181.87

SUBTOTAL of Disbursements This Page (optional)

5988.61

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 48

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input checked="" type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) MIKE GRAVEL	Transaction ID: SB27A.20397 Date of Disbursement																				
Mailing Address 1600 NO OAK ST APT 1412	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City ARLINGTON State VA Zip Code 22209	Amount of Each Disbursement this Period																				
Purpose of Disbursement LOAN REPAYMENT	<table border="1"> <tr> <td colspan="10">95.70</td> </tr> </table>	95.70																			
95.70																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) MIKE GRAVEL	Transaction ID: SB27A.20398 Date of Disbursement																				
Mailing Address 1600 NO OAK ST APT 1412	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	8												
City ARLINGTON State VA Zip Code 22209	Amount of Each Disbursement this Period																				
Purpose of Disbursement LOAN REPAYMENT	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) MIKE GRAVEL	Transaction ID: SB27A.20399 Date of Disbursement																				
Mailing Address 1600 NO OAK ST APT 1412	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
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City ARLINGTON State VA Zip Code 22209	Amount of Each Disbursement this Period																				
Purpose of Disbursement LOAN REPAYMENT	<table border="1"> <tr> <td colspan="10">43.59</td> </tr> </table>	43.59																			
43.59																					
Candidate Name MIKE GRAVEL FOR PRESIDENT 2008	<table border="1"> <tr> <td>101</td> </tr> </table> Category/ Type	101																			
101																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1639.29

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 48

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input checked="" type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
LOAN REPAYMENT

Candidate Name
MIKE GRAVEL FOR PRESIDENT 2008

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☒ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB27A.20400

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
LOAN REPAYMENT

Candidate Name
MIKE GRAVEL FOR PRESIDENT 2008

101
Category/
Type

Office Sought: ☐ House
☐ Senate
☒ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB27A.20402

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

787.83

SUBTOTAL of Disbursements This Page (optional)

1787.83

TOTAL This Period (last page this line number only)

44615.73

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 10 / 48

LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4621

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

30000.00

Cumulative Payment To Date

30000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 7D D
2 4Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4629

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

3000.00

Cumulative Payment To Date

3000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 7D D
2 4Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4622

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

15000.00

Cumulative Payment To Date

15000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 9D D
2 7Y Y Y Y
2 0 0 6

12/31/2006

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4623

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

100.00

Cumulative Payment To Date

100.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 9D D
2 7Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4726

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

5000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 0D D
2 5Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4743

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

6000.00

Cumulative Payment To Date

6000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 1D D
3 0Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4744

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

5000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 2D D
1 8Y Y Y Y
2 0 0 6

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5215

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

806.74

Cumulative Payment To Date

806.74

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
0 7Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5217

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

181.87

Cumulative Payment To Date

181.87

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
0 7Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5220

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

95.70

Cumulative Payment To Date

95.70

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 3Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5216

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1500.00

Cumulative Payment To Date

1500.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 5Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 21 / 48

FOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5219

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

43.59

Cumulative Payment To Date

43.59

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 6Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-P**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 22 / 48

FOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5221

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1000.00

Cumulative Payment To Date

1000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
2 8Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 23 / 48

LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5218

LOAN SOURCE Full Name (Last, First, Middle Initial)
MIKE GRAVEL - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

787.83

Cumulative Payment To Date

787.83

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 3D D
0 8Y Y Y Y
2 0 0 7

12/31/2008

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

0.00

TOTALS This Period (last page in this line only) ▶

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☒ 11
☐ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paypal IncNature of Debt (Purpose):
BALANCE IN PAYPAL NOT YET
TRANSFERRED

Mailing Address 7615 37th Ave

City State ZIP Code
Jackson Heights NY 11372

Outstanding Balance Beginning This Period

24.74

Transaction ID: SD11.20545

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.74

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paypal IncNature of Debt (Purpose):
PAYPAL DONATIONS NOT YET
TRANSFERRED

Mailing Address 7615 37th Ave

City State ZIP Code
Jackson Heights NY 11372

Outstanding Balance Beginning This Period

151.37

Transaction ID: SD11.20546

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

151.37

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paypal IncNature of Debt (Purpose):
PAYPAL DONATIONS NOT YET
TRANSFERRED

Mailing Address 7615 37th Ave

City State ZIP Code
Jackson Heights NY 11372

Outstanding Balance Beginning This Period

506.15

Transaction ID: SD11.20547

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

506.15

1) SUBTOTALS This Period This Page (optional).....

682.26

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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<input checked="" type="checkbox"/>	11
<input type="checkbox"/>	12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 POWERPAY

 Nature of Debt (Purpose):
 CR CARD DONATIONS HELD
 BY CC MERCHANT

Mailing Address 280 FORE ST

City	State	ZIP Code
PORTLAND	ME	04101

Outstanding Balance Beginning This Period

252.35

Transaction ID: SD11.20592

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

252.35

1) **SUBTOTALS** This Period This Page (optional)..... ▶

252.35

2) **TOTALS** This Period (last page this line number only)..... ▶

934.61

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)..... ▶

934.61

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CHRISTINE D'AMICO

Nature of Debt (Purpose):
CONSULTING FEES FIELD REP
CT

Mailing Address 2612 NORTH AVE
D-9

City State ZIP Code
BRIDGEPORT CT 06604

Outstanding Balance Beginning This Period

1500.00

Transaction ID: SD12.20453

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DICKSTEIN SHAPIRO LLP

Nature of Debt (Purpose):
LEGAL FEES APRIL 2008

Mailing Address 1825 EYE STREET NW

City State ZIP Code
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

6914.00

Transaction ID: SD12.20016

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6914.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DICKSTEIN SHAPIRO LLP

Nature of Debt (Purpose):
LEGAL FEES MAY 2008

Mailing Address 1825 EYE STREET NW

City State ZIP Code
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

313.00

Transaction ID: SD12.20247

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

313.00

1) **SUBTOTALS** This Period This Page (optional).....

8727.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DICKSTEIN SHAPIRO LLPNature of Debt (Purpose):
LEGAL FEES AUGUST 2008

Mailing Address 1825 EYE STREET NW

City State ZIP Code
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

936.00

Transaction ID: SD12.20372

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

936.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DICKSTEIN SHAPIRO LLPNature of Debt (Purpose):
LEGAL FEES SEPTEMBER 2008

Mailing Address 1825 EYE STREET NW

City State ZIP Code
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

156.00

Transaction ID: SD12.20380

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

156.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DICKSTEIN SHAPIRO LLPNature of Debt (Purpose):
LEGAL FEES DECEMBER 2008

Mailing Address 1825 EYE STREET NW

City State ZIP Code
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20409

Amount Incurred This Period

260.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

260.00

1) **SUBTOTALS** This Period This Page (optional).....

1352.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jacobson Elliott

Nature of Debt (Purpose):
CONSULTING NATIONAL FIELD
DIRECTOR

Mailing Address 1001 3rd Street, SW

City State ZIP Code
Washington DC 20024

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.20419

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jacobson Elliott

Nature of Debt (Purpose):
CONSULTING NATIONAL FIELD
DIRECTOR

Mailing Address 1001 3rd Street, SW

City State ZIP Code
Washington DC 20024

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.20418

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jacobson Elliott

Nature of Debt (Purpose):
CONSULTING - FUNDRAISING

Mailing Address 1001 3rd Street, SW

City State ZIP Code
Washington DC 20024

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD12.20014

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional).....

7000.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MIKE GRAVELNature of Debt (Purpose):
EXPENSE REIMBURSEMENT -
HQ RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD12.20648

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MIKE GRAVELNature of Debt (Purpose):
EXPENSE REIMBURSEMENT HQ
RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20649

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MIKE GRAVELNature of Debt (Purpose):
EXPENSE REIMBURSEMENT HQ
RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20650

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional).....

1500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 MIKE GRAVEL

 Nature of Debt (Purpose):
 EXPENSE REIMBURSEMENT HQ
 RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City	State	ZIP Code
ARLINGTON	VA	22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20651

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 MIKE GRAVEL

 Nature of Debt (Purpose):
 EXPENSE REIMBURSEMENT HQ
 RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City	State	ZIP Code
ARLINGTON	VA	22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20652

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 MIKE GRAVEL

 Nature of Debt (Purpose):
 EXPENSE REIMBURSEMENT HQ
 RENTAL/STORAGE

Mailing Address 1600 NO OAK ST APT 1412

City	State	ZIP Code
ARLINGTON	VA	22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20653

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional).....

750.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MIKE GRAVELNature of Debt (Purpose):
EXPENSE REIMBURSEMENT HQ
RENTAL/STORAGE

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20654

Amount Incurred This Period

250.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SUSAN GRIFFINNature of Debt (Purpose):
CAMPAIGN COORDINATIONMailing Address 5520 COVINGTON CT
#106City State ZIP Code
DEARBORN MI 48126

Outstanding Balance Beginning This Period

525.00

Transaction ID: SD12.20436

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

525.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MINDI IDENNature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
COORDINATION

Mailing Address 149 S. Barrington Ave. #326

City State ZIP Code
LOS ANGELES CA 90049

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.19797

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional).....

3775.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
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☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
BECKY ISAISNature of Debt (Purpose):
CONSULTING FEE FOR FIELD
REP NV

Mailing Address 5512 VISTA RIDGE WAY

City State ZIP Code
KEARNS UT 84118

Outstanding Balance Beginning This Period

1050.00

Transaction ID: SD12.20450

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RODRIGUEZ JOSENature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
FIELD ORGANIZER

Mailing Address 1435 MONROE ST NW

City State ZIP Code
WASHINGTON DC 20010

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20411

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RODRIGUEZ JOSENature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
FIELD ORGANIZER

Mailing Address 1435 MONROE ST NW

City State ZIP Code
WASHINGTON DC 20010

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20412

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

6050.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
RODRIGUEZ JOSENature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
FIELD ORGANIZER

Mailing Address 1435 MONROE ST NW

City State ZIP Code
WASHINGTON DC 20010

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.19794

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RODRIGUEZ JOSENature of Debt (Purpose):
CONSULTING FEES CAMPAIGN
FIELD ORGANIZER

Mailing Address 1435 MONROE ST NW

City State ZIP Code
WASHINGTON DC 20010

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20015

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.18205

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

7500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.18206

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.19795

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20427

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

7500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20428

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD12.20011

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD12.20245

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional).....

4500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
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☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD12.20332

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD12.20371

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

850.00

Transaction ID: SD12.20375

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

850.00

1) **SUBTOTALS** This Period This Page (optional).....

1850.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 KG INTERNATIONAL

 Nature of Debt (Purpose):
 CONSULTING FOR ACCOUNTING
 SERVICES

Mailing Address 11311 TRENTON CT

City	State	ZIP Code
BRISTOW	VA	20136

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD12.20377

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 KG INTERNATIONAL

 Nature of Debt (Purpose):
 CONSULTING FOR ACCOUNTING
 SERVICES

Mailing Address 11311 TRENTON CT

City	State	ZIP Code
BRISTOW	VA	20136

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD12.20379

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 KG INTERNATIONAL

 Nature of Debt (Purpose):
 CONSULTING FOR ACCOUNTING
 SERVICES

Mailing Address 11311 TRENTON CT

City	State	ZIP Code
BRISTOW	VA	20136

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD12.20382

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

1) **SUBTOTALS** This Period This Page (optional).....

1500.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KG INTERNATIONALNature of Debt (Purpose):
CONSULTING FOR ACCOUNTING
SERVICES

Mailing Address 11311 TRENTON CT

City State ZIP Code
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.20429

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NEIL KIERNAN STEPHENSONNature of Debt (Purpose):
CONSULTING FEES MI FIELD
REPRESENTATIVE

Mailing Address 52177 LEXINTON LN

City State ZIP Code
CHESTERFIELD MI 48051

Outstanding Balance Beginning This Period

525.00

Transaction ID: SD12.20438

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

525.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AFIFA KLOUJNature of Debt (Purpose):
CONSULTING FEES FOR OFFICE
MANAGEMENTMailing Address 1001 3RD STREET SW
#804City State ZIP Code
WASHINGTON DC 20024

Outstanding Balance Beginning This Period

1050.00

Transaction ID: SD12.20440

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

1) **SUBTOTALS** This Period This Page (optional).....

2575.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
JON KRAUSNature of Debt (Purpose):
CONSULTING FEES DEPUTY
CAMPAIGN MANAGER

Mailing Address 4702 BELMONT DR

City State ZIP Code
EMMAUS PA 18049

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.20416

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JON KRAUSNature of Debt (Purpose):
CONSULTING FEES DEPUTY
CAMPAIGN MANAGER

Mailing Address 4702 BELMONT DR

City State ZIP Code
EMMAUS PA 18049

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.20417

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JON KRAUSNature of Debt (Purpose):
CONSULTING FEES DEPUTY
CAMPAIGN MANAGER

Mailing Address 4702 BELMONT DR

City State ZIP Code
EMMAUS PA 18049

Outstanding Balance Beginning This Period

2000.00

Transaction ID: SD12.19791

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional).....

8000.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
JOE LAURIANature of Debt (Purpose):
CONSULTING FEES NATL PUBL-
ICITY DIRECTORMailing Address 205 PINEHURST AVE
#6JCity State ZIP Code
NEW YORK NY 10033

Outstanding Balance Beginning This Period

1050.00

Transaction ID: SD12.20430

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
mosier lynneNature of Debt (Purpose):
CONSULTING FEES CALIFORNIA
COORDINATOR

Mailing Address 76 patrick way

City State ZIP Code
half moon bay CA 94019

Outstanding Balance Beginning This Period

5000.00

Transaction ID: SD12.19793

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SKYLER MCKINLEYNature of Debt (Purpose):
CONSULTING FOR INFORMATI-
ON TECHNOLOGY

Mailing Address 1815 S. QUEEN WAY

City State ZIP Code
LAKEWOOD CO 80232

Outstanding Balance Beginning This Period

5000.00

Transaction ID: SD12.20457

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) **SUBTOTALS** This Period This Page (optional).....

11050.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
CASEY MCLLVAINNature of Debt (Purpose):
CONSULTING ALTERNATIVE DE-
BATE TECHNOLOGY

Mailing Address 225 LYCEUM AVE

City State ZIP Code
PHILADELPHIA PA 19128

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD12.20455

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DAVID NELSON VAN-DETTENature of Debt (Purpose):
CONSULTING FIELD REP FL

Mailing Address 1013 RIDGE ROAD

City State ZIP Code
LARGO FL 33770

Outstanding Balance Beginning This Period

525.00

Transaction ID: SD12.20444

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

525.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DAVID NELSON VAN-DETTENature of Debt (Purpose):
CONSULTING FEES FIELD REP
FL

Mailing Address 1013 RIDGE ROAD

City State ZIP Code
LARGO FL 33770

Outstanding Balance Beginning This Period

1050.00

Transaction ID: SD12.20446

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

1) **SUBTOTALS** This Period This Page (optional).....

2075.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

10000.00

Transaction ID: SD12.18207

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20421

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20422

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

15000.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20423

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NETWORK GUILD LLCNature of Debt (Purpose):
CONSULTING FEES FOR WEBIS-
TE MANAGEMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code
HENDON VA 20170

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20424

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CHRIS PETHRICKNature of Debt (Purpose):
CONSULTING FEES FOR CAMPA-
IGN MAGT

Mailing Address 16305 WOODVILLE ROAD

City State ZIP Code
BRANDYWINE MD 20613

Outstanding Balance Beginning This Period

7498.00

Transaction ID: SD12.20012

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7498.00

1) **SUBTOTALS** This Period This Page (optional).....

12498.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 CHRIS PETHRICK

 Nature of Debt (Purpose):
 CONSULTING FEES FOR CAMPA-
 IGN MAGT

Mailing Address 16305 WOODVILLE ROAD

City	State	ZIP Code
BRANDYWINE	MD	20613

Outstanding Balance Beginning This Period

7498.00

Transaction ID: SD12.20246

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7498.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 CHRIS PETHRICK

 Nature of Debt (Purpose):
 CONSULTING FEES FOR CAMPA-
 IGN MAGT

Mailing Address 16305 WOODVILLE ROAD

City	State	ZIP Code
BRANDYWINE	MD	20613

Outstanding Balance Beginning This Period

7498.00

Transaction ID: SD12.20425

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7498.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 CHRIS PETHRICK

 Nature of Debt (Purpose):
 CONSULTING FEES FOR CAMPA-
 IGN MAGT

Mailing Address 16305 WOODVILLE ROAD

City	State	ZIP Code
BRANDYWINE	MD	20613

Outstanding Balance Beginning This Period

3749.00

Transaction ID: SD12.20426

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3749.00

1) **SUBTOTALS** This Period This Page (optional).....

18745.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
GEORGE REBHNature of Debt (Purpose):
PHOTOGRAPH

Mailing Address 4899 35TH RD NORTH

City State ZIP Code
ARLINGTON VA 22207

Outstanding Balance Beginning This Period

2000.00

Transaction ID: SD12.20448

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
George RipleyNature of Debt (Purpose):
CONSULTING FEES FIELD REP
DC

Mailing Address 1425 Monroe S. NW

City State ZIP Code
Washington DC 20010

Outstanding Balance Beginning This Period

525.00

Transaction ID: SD12.20447

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

525.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
APRIL SHARPLEYNature of Debt (Purpose):
CONSULTING CAMPAIGN COORD-
INATION

Mailing Address 3801 TATTERSHALL LANE

City State ZIP Code
AUSTIN TX 78727

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.18204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

5025.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
APRIL SHARPLEYNature of Debt (Purpose):
CONSULTING CAMPAIGN COORDINATION

Mailing Address 3801 TATTERSHALL LANE

City State ZIP Code
AUSTIN TX 78727

Outstanding Balance Beginning This Period

1500.00

Transaction ID: SD12.19798

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
STACEY STANDLEYNature of Debt (Purpose):
CONSULTING FOR ENVIRONMENT ISSUES

Mailing Address 5114 TURNBURY LN

City State ZIP Code
SPANISH TRAIL NV 89113

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.20452

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DAN SWARTZNature of Debt (Purpose):
FILM PRODUCTIONMailing Address 95 HORATIO ST
APT 406City State ZIP Code
NEW YORK NY 10014

Outstanding Balance Beginning This Period

1050.00

Transaction ID: SD12.20432

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

1) **SUBTOTALS** This Period This Page (optional).....

5050.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
RICH SWARTZNature of Debt (Purpose):
FILM PRODUCTIONMailing Address 95 HORATIO ST
APT 406City State ZIP Code
NEW YORK NY 10014

Outstanding Balance Beginning This Period

1050.00

Transaction ID: SD12.20434

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1050.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING FOR DATABASE
MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.18200

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING FOR DATABASE
MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.18201

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional).....

7050.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING FOR DATABASE
MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.18202

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING FOR DATABASE
MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.19796

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TELENOMICS GROUPNature of Debt (Purpose):
CONSULTING FOR DATABASE
MANAGEMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD12.20420

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) SUBTOTALS This Period This Page (optional).....

7000.00

2) TOTALS This Period (last page this line number only).....

146072.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

146072.00